

City of Lodi
Human Resources Department

Supplemental Questionnaire

The purpose of this questionnaire is to obtain enough job-related information to select the best qualified applicants for the available positions. A resume may not be substituted for this form.

Please answer the following questions:

Name: _____

1) Computer Skills:

| | | | |
|------------------------|-------|----|---------------------|
| Microsoft Word: | Yes | No | Years of Exp. _____ |
| Excel: | Yes | No | Years of Exp. _____ |
| Access: | Yes | No | Years of Exp. _____ |
| Other: | _____ | | |

2) Part-time and Full-time Availability:

Part-time work: Yes No
(4 hour shift)
If Yes, what shift: Mornings
Afternoons
Or Either

OR

Full-time work: Yes No

OR

I have no preference:

3) Weekends and Evenings Availability

Weekend Work:

Yes, I can work Saturday & Sunday
No, I cannot work Weekends

Evening Work:

Yes, I can work evenings
No, I cannot work evenings

Are you available immediately: Yes No

If no, when: _____

_____ **I am interested in working on a short term basis (less than 6 months).**

_____ **I am interested in working on a long term basis (greater than 6 months).**

_____ **I have no preference.**

*****You must return this completed supplemental with your application for it to be considered.**